

2 of 2

CLAIMS

10/03/818

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
3		1				
4		1				
5	1					
6						
7						
8		4				
9						
10						
11		4				
12	1					
13						
14						
15						
16						
17						
18						
19						
20						
21	1					
22		8				
23		0				
24		0				
25		0				
26						
27						
28						
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43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	14					
TOTAL DEP.	14					
TOTAL	14					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
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57						
58						
59						
60						
61						
62						
63						
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96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL						

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 1031818	FILING DATE			
						APPLICANT(S)				
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	
1	1				1		51			
2							52			
3							53			
4							54			
5							55			
6							56			
7							57			
8							58			
9							59			
10							60			
11							61			
12	1				1		62			
13							63			
14							64			
15							65			
16							66			
17							67			
18							68			
19							69			
20							70			
21							71			
22							72			
23							73			
24							74			
25							75			
26							76			
27							77			
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29							79			
30							80			
31							81			
32							82			
33							83			
34							84			
35							85			
36							86			
37							87			
38							88			
39							89			
40							90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	1		1		1		TOTAL IND.			
TOTAL DEP.							TOTAL DEP.			
TOTAL CLAIMS							TOTAL CLAIMS			

*PTO-1350 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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